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Complete if Known Substitute for form 1449/PTO Application Number 10/567,366-Conf. #9864 INFORMATION DISCLOSURE Filing Date February 7, 2006 STATEMENT BY APPLICANT First Named Inventor Takahisa HIKIDA Art Unit 1731 (Use as many sheets as necessary) Examiner Name Not Yet Assigned Sheet 0033-1062PUS1 1 Attorney Docket Number

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ² (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear

FOREIGN PATENT DOCUMENTS							
		Foreign Patent Document	Publication	Name of Patentee or	Pages, Columns, Lines,		
Examiner Initials*	Cite No. ¹	Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)	Date MM-DD-YYYY	Applicant of Cited Document	Where Relevant Passages Or Relevant Figures Appear	T⁰	
/EH/	BA	WO-02/38859-A1	05-16-2002			ABS	
/EH/	ВВ	EP-1 338 696-A1	08-27-2003				
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